

1 10A NCAC 13P .0905 is proposed for amendment as follows:

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3 **10A NCAC 13P .0905 RENEWAL DESIGNATION PROCESS**

4 (a) One of two options may be utilized to achieve ~~trauma-center~~ Trauma Center renewal:

- 5 (1) Undergo a site visit conducted by OEMS to obtain a four-year renewal designation; or
6 (2) Undergo a verification visit arranged by the ACS, in conjunction with OEMS, to obtain a ~~three-~~
7 ~~year~~ four-year renewal designation;

8 (b) For hospitals choosing Subparagraph (a)(1) of this Rule:

- 9 (1) Prior to the end of the designation period, the OEMS shall forward to the hospital an RFP for
10 completion. The hospital shall, within 10 days of receipt of the RFP, define for OEMS the ~~trauma~~
11 ~~center's~~ Trauma Center's trauma primary catchment area. Upon this notification, OEMS shall
12 notify the respective Board of County Commissioners in the applicant's trauma primary catchment
13 area of the request for renewal to allow for comment.
14 (2) Hospitals seeking a renewal of ~~trauma-center~~ Trauma Center designation shall complete and
15 submit ~~an original and five copies of a bound, page numbered one paper copy and an electronic~~
16 ~~copy of the~~ RFP as directed by the OEMS to the OEMS and the specified site surveyors at least 30
17 days prior to the site visit. The RFP shall include information that supports compliance with the
18 criteria contained in Rule .0901, .0902, or .0903 of this Section as it relates to the ~~trauma-center's~~
19 Trauma Center's level of designation.
20 (3) All criteria defined in Rule .0901, .0902, or .0903 of this Section, as relates to the ~~trauma-center's~~
21 Trauma Center's level of designation, shall be met for renewal designation.
22 (4) A site visit shall be conducted within 120 days prior to the end of the designation period. The site
23 visit shall be scheduled on a date mutually agreeable to the hospital and the OEMS.
24 (5) The composition of a Level I or II site survey team shall be the same as that specified in Rule
25 .0904(k) of this Section.
26 (6) The composition of a Level III site survey team shall be the same as that specified in Rule .0904(l)
27 of this Section.
28 (7) On the day of the site visit the hospital shall make available all requested patient medical charts.
29 (8) A post-conference report based on consensus of the site review team shall be given verbally
30 during the summary conference. A written consensus report shall be completed, to include a peer
31 review report, by the primary reviewer and submitted to OEMS within 30 days of the site visit.
32 (9) The report of the site survey team and a staff recommendation shall be reviewed by the State
33 Emergency Medical Services Advisory Council at its next regularly scheduled meeting which is
34 more than 30 days following the site visit. Based upon the site visit report and the staff
35 recommendation, the State Emergency Medical Services Advisory Council shall recommend to
36 the OEMS that the request for ~~trauma-center~~ Trauma Center renewal be approved; approved with a
37 contingency(ies) due to a deficiency(ies) requiring a focused review; approved with a

contingency(ies) not due to a ~~deficiency(ies)~~; deficiency(ies) requiring a consultative visit; or denied.

(10) Hospitals with a deficiency(ies) have up to 10 working days prior to the State EMS Advisory Council meeting to provide documentation to demonstrate compliance. If the hospital has a deficiency that cannot be corrected in this period prior to the State EMS Advisory Council meeting, the hospital, instead of a four-year renewal, may be given a time period (up to 12 months) to demonstrate compliance and undergo a focused review, that may require an additional site visit. The hospital shall retain its ~~trauma-center~~ Trauma Center designation during the focused review period. If compliance is demonstrated within the prescribed time period, the hospital shall be granted its designation for the four-year period from the previous designation's expiration date. If compliance is not demonstrated within the time period, as specified by OEMS, the ~~trauma center~~ Trauma Center designation shall not be renewed. To become redesignated, the hospital shall ~~be required to~~ submit an updated RFP and follow the initial applicant process outlined in Rule .0904 of this Section.

(11) The final decision regarding trauma center renewal shall be rendered by the OEMS.

(12) The hospital ~~shall~~ will be notified in writing of the State Emergency Medical Services Advisory Council's and OEMS' final recommendation within 30 days of the Advisory Council meeting.

(13) The four-year renewal date that may be eventually granted shall not be extended due to the focused review period.

~~(14) Hospitals in the process of satisfying contingencies placed on them prior to December 31, 2001, shall be evaluated based on the rules that were in effect at the time of their renewal visit.~~

(c) For hospitals choosing Subparagraph (a)(2) of this Rule:

(1) At least six months prior to the end of the ~~trauma-center's~~ Trauma Center's designation period, the trauma center must notify the OEMS of its intent to undergo an ACS verification visit. It must simultaneously define in writing to the OEMS its trauma primary catchment area. Trauma ~~centers~~ Centers choosing this option must then comply with all the ACS' verification procedures, as well as any additional state criteria as outlined in Rule .0901, .0902, or .0903, as apply to their level of designation.

(2) If a ~~trauma-center~~ Trauma Center currently using the ACS' verification process chooses not to renew using this process, it must notify the OEMS at least six months prior to the end of its state trauma center designation period of its intention to exercise the option in Subparagraph (a)(1) of this Rule.

(3) When completing the ACS' documentation for verification, the ~~trauma-center~~ Trauma Center must ~~simultaneously submit two identical copies~~ ensure access to the ACS on-line PRQ (pre-review questionnaire) to OEMS. The ~~trauma-center~~ Trauma Center must simultaneously complete documents supplied by OEMS to verify compliance with additional North Carolina criteria (i.e., criteria that exceed the ACS criteria) and forward these to OEMS and the ACS.

- 1 (4) The OEMS shall notify the Board of County Commissioners within the trauma center's trauma
2 primary catchment area of the ~~trauma center's~~ Trauma Center 's request for renewal to allow for
3 comments.
- 4 (5) The ~~trauma center~~ Trauma Center must make sure the site visit is scheduled to ensure that the
5 ACS' final written report, accompanying medical record reviews and cover letter are received by
6 OEMS at least 30 days prior to a regularly scheduled State Emergency Medical Services Advisory
7 Council meeting to ensure that the ~~trauma center's~~ Trauma Center 's state designation period does
8 not terminate without consideration by the State Emergency Medical Services Advisory Council.
- 9 (6) The composition of the Level I or Level II site team must be as specified in Rule .0904(k) of this
10 Section, except that both the required trauma surgeons and the emergency physician may be from
11 out-of-state. Neither North Carolina Committee on Trauma nor North Carolina College of
12 Emergency Physician membership ~~shall be~~ is required of the surgeons or emergency physician,
13 respectively, if from out-of-state. The date, time, and all site team members must be pre-approved
14 by the OEMS at least 30 days prior to the site visit.
- 15 (7) The composition of the Level III site team must be as specified in Rule .0904(l) of this Section,
16 except that the trauma surgeon, emergency physician, and trauma nurse coordinator/program
17 manager may be from out-of-state. Neither North Carolina Committee on Trauma nor North
18 Carolina College of Emergency Physician membership ~~shall be~~ is required of the surgeon or
19 emergency physician, respectively, if from out-of-state. The date, time, and all site team members
20 must be pre-approved by the OEMS at least 30 days prior to the site visit.
- 21 (8) All state ~~trauma center~~ Trauma Center criteria must be met as defined in Rules .0901, .0902, and
22 ~~0903, .0903~~ of this Section, for renewal of state designation. An ACS' verification is not required
23 for state designation. An ACS' verification does not ensure a state designation.
- 24 (9) ACS reviewers shall complete the state designation preliminary reporting form immediately prior
25 to the post conference meeting. This document and the ACS final written report and supporting
26 documentation described in Paragraph (10) of this Rule shall be used to generate a staff summary
27 of findings report following the post conference meeting for presentation to the NC EMS
28 Advisory Council for redesignation.
- 29 (9) (10) The final written report issued by the ACS' verification review committee, the accompanying
30 medical record reviews (from which all identifiers may be removed), and cover letter must be
31 forwarded to OEMS within 10 working days of its receipt by the ~~trauma center~~ Trauma Center
32 seeking renewal.
- 33 (10) (11) ~~The written reports from the ACS and the OEMS staff recommendation shall be reviewed by The~~
34 OEMS shall present its summary of findings report to the State Emergency Medical Services
35 Advisory Council at its next regularly scheduled meeting. The State EMS Advisory Council shall
36 recommend to the Chief of the OEMS that the request for ~~trauma center~~ Trauma Center renewal

1 be approved; approved with a contingency(ies) due to a deficiency(ies) requiring a focused
2 review; approved with a contingency(ies) not due to a deficiency(ies); or denied.

3 ~~(11)~~ (12) The hospital ~~shall~~ will be notified in writing of the State Emergency Medical Services Advisory
4 Council's and OEMS' final recommendation within 30 days of the Advisory Council meeting.

5 ~~(12)~~ (13) Hospitals with contingencies, as the result of a deficiency(ies), as determined by OEMS, have up
6 to 10 working days prior to the State EMS Advisory Council meeting to provide documentation to
7 demonstrate compliance. If the hospital has a deficiency that cannot be corrected in this time
8 period prior to the State EMS Advisory Council meeting, the hospital, instead of a four-year
9 renewal, may undergo a focused review (to be conducted by the OEMS) whereby the ~~trauma~~
10 ~~center~~ Trauma Center may be given up to 12 months to demonstrate compliance. Satisfaction of
11 contingency(ies) may require an additional site visit. The hospital shall retain its ~~trauma-center~~
12 Trauma Center designation during the focused review period. If compliance is demonstrated
13 within the prescribed time period, the hospital shall be granted its designation for the four-year
14 period from the previous designation's expiration date. If compliance is not demonstrated within
15 the time period, as specified by OEMS, the ~~trauma-center~~ Trauma Center designation shall not be
16 renewed. To become redesignated, the hospital shall ~~be required to~~ submit a new RFP and follow
17 the initial applicant process outlined in Rule .0904 of this Section.
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19 *History Note: Authority G.S. 131E-162; 143-509(3);*
20 *Temporary Adoption Eff. January 1, 2002;*
21 *Eff. April 1, 2003;*
22 *Amended Eff. January 1, 2009; January 1, 2004.*